APPLICATION FOR MEMBERSHIP ON THE CRIMINAL JUSTICE ACT DEFENSE PANEL

(Prior applicants to the Panel should see the note on the following page.)

UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF CALIFORNIA

APPLICATIONS
MUST BE POSTMARKED BY
MAY 8, 2006

NORTHERN DISTRICT OF CALIFORNIA CRIMINAL JUSTICE ACT PANEL APPLICATION FORM

<u>NOTE</u>: If you applied for membership either of the previous three years and wish to reactivate your application, please send a letter to the appropriate address (San Francisco or San Jose) stating that you want to be considered for this year's panel. It is <u>not</u> necessary to submit a new application, although you may send any new information which you would like to have included with your earlier application. If you choose to do this, please submit the appropriate number of copies for the additional materials. <u>It is strongly advised to contact Ruben Deang Jr. from the Federal Public Defender's Office in San Francisco and find out the status of your earlier application.</u>

INSTRUCTIONS

Please type responses (in several sections you will have the option of preparing the information on a word processor).

The Regulations for Implementation of the Northern District's Criminal Justice Act Plan are attached to the end of the application. Please detach and retain the regulations for your future reference.

Applications for Appellate Panel

Mail or Deliver Original and 4 copies (including 4 copies of the writing sample) to the address which follows for the San Francisco/Oakland Trial Panel. If you are applying for membership on a trial panel <u>and</u> on the appellate panel, please send enough copies for both (<u>i.e.</u>, San Francisco/Oakland Panel and Appellate Panel would require a total of Original and 13 copies).

Applications for San Francisco/Oakland Trial

Mail or Deliver Original and 8 copies (including 8 copies of the writing sample) to:

CJA Panel Selection Committee Attn:Ruben P. Deang Jr. Federal Public Defender's Office 450 Golden Gate Avenue, Box 36106 San Francisco, California 94102

Applications for San Jose Panel

This Panel only accepts application from attorneys whose offices are located in the South Bay area including Santa Cruz County.

Mail or Deliver Original and 3 copies (including 3 copies of the writing sample) to:

CJA Panel Selection Committee Attn: Elaine Spikes Federal Public Defender's Office 160 West Santa Clara Avenue, Suite 575 San Jose, California 95113

Name:	
<u>Applying</u>	g for (you may apply for more than one panel):
	Trial Panel (San Francisco/Oakland Division) □ Trial Panel (San Jose Division) □
	Appellate Panel □
	If you applied for membership in the San Francisco/Oakland Division Trial Panel, please mark if you are willing to accept occasional appointments in the San Jose Division along with your San Francisco/Oakland appointments

APPLICATION FOR MEMBERSHIP ON THE CRIMINAL JUSTICE ACT DEFENSE PANEL

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA

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APPLICATION

Biographical Informati		
Business address	Name	
	Street	
	City, State and Zip Code	
Business telephone	Facsimile number	E-mail address
Present Employment or	r Affiliation.	
Name of firm or agency		
Address		
	Street	
	City, State and Zip Code	
()		
	Telephone	
Your title or position		
_	anaging partner's name (if any)	
	or position	
Dates of employment or	affiliation	
Give a synopsis of this paccounting for most of y	position including nature of praction time.	ctice and types of matters

C. Past Legal Employment or Affiliations.

Prior Positions (List legal experience for last fifteen years, excluding your current position)

Please use the following format for each employer. (You may prepare this information on copies of this form, or you may use a word processor. It is important that the information be presented in this format.)

Employe	r, firm or agency
Address	
Telephon	ne ()
Superviso	or or managing partner
Title or r	position(s) you held (e.g., associate, partner)
Title of p	rosition(s) you neid (e.g., associate, partner)
Dates of	employment or affiliation
Duties	

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and misdemeand	or cases tried, the	number of ap	peals handled,	and the typ	es of n
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and misdemeand	or cases tried, the	number of ap	peals handled,	and the typ	es of n
and misdemeand	or cases tried, the	number of ap	peals handled,	and the typ	es of n

D. **Description of Legal Practice**.

1.	Estimate what percentages of your total time concerned:	ne in legal work during the last seven years
	Federal civil law matters:	%
	Federal criminal law matters:	%
	State civil law matters:	%
	State criminal law matters:	%
	Other ¹ :	%
2.	Estimate the percentages of your total time years that were:	spent in legal work during the last seven
	In court	%
	Litigation, but not in court:	%
	Negotiations/Mediation:	%
	Advising and counseling clients:	%
	Legal research and writing:	%
	Supervising the legal work of others:	%
	Legal Education:	%
	Other matters ² :	%

 $^{^{1}}$ If a single aspect(s) of your legal work occupied more than 10%, please list it separately with corresponding percentage, rather than in the "Other" category. 2 E.g. administration, "business development", firm management, finances, etc.

Ε.	Part I.	Trial Panel.	(If you are only	applying to	the appellate	panel,	you do	not
	need to	submit this in	nformation.)					

Provide the following information for <u>five</u> federal or state felony jury trials in which you were involved. It is preferred that you describe your more significant and recent cases. In the absence of five trials, list complex criminal or civil matters which resolved other than by trial. Please use the following format for <u>each</u> trial. You may duplicate this form or prepare the information on a word processor. It is important that you provide the information in this format.

Case name					
Court, case citation number (if any) and year					
Presiding judge					
Nature of case					
Your role in case					
Results of your activities in this	case				
Co-counsel(s)					
co counsel(s)	Name				
	Address				
City/State/Zip Code		Phone			
•					
Opposing counsel(s)	Name				
	Street				
City/State/Zip Code		Phone			

E. <u>Part II.</u> <u>Appellate Panel.</u> (If you are only applying for the trial panel, it is not necessary for you to complete this section.)

Provide the following information for <u>ten</u> federal or state criminal appeals in which you were involved. It is preferred that you describe your more significant and recent cases. In place of ten appeals, you may list criminal trials, complex criminal matters settled short of trial, or habeas corpus proceedings. Please use the following format for <u>each</u> appeal. You may duplicate this form or prepare the information on a word processor. It is important that you provide the information in this format.

Case name	
	year
,	
Panel of judges or presiding judge	
Nature of case	
Your role in case	
Results of your activities in this case	
, <u> </u>	
Co-counsel(s)	
Na	me
Add	dress
City/State/Zip Code	Phone
Opposing counsel(s)	
Na	me
Str	reet
City/State/Zip Code	Phone

	Prior Panel Experience.				
	If you are a past or present member of this district's Criminal Justice Act Trial or Appeals Panel, list dates of panel membership.				
	For any other criminal indigent panel of which you are or were a member, please list the panel, the dates of membership, the class of criminal case you were qualified to tr if any, and the name, address and telephone number of the panel supervisor or administrator.				
	Court Admission.				
	List state court bars other than California to which you are presently admitted to practice and the year of admission. Provide the addresses of the administrative office of these organizations.				
	State bar				
	Year admitted Reg. #				
	AddressStreet				
	City/State/Zip Code				
	State bar				
	Year admitted Reg. #				
	AddressStreet				
	City/State/Zip Code				
C	of Admission to:				
	Northern District of California:				
	Ninth Circuit Court of Appeals:				
	United States Supreme Court:				
	State Bar of California: State Bar Number:				

Education.
Undergraduate institution
Degree(s) received & year awarded
Major field(s) of study
Law school name
Law school addressStreet
City/State/Zip Code
Degree received & year awarded
Describe any honors, awards, law review or other activities or achievements.
Other undergraduate or graduate education received
Institution attended
Institution attended Course of study
Institution attended Course of study Degree received (if any) & year awarded
Institution attended Course of study Degree received (if any) & year awarded

I. <u>References</u>.

Please list information for three persons who are well-acquainted with your work and with your qualifications to be a panel member.

Name		
Title		
	Street	
	City/State/Zip Code	
Relationship	Phone	
•		
Name		
	Street	
	City/State/Zip Code	
	Phone	
Relationship		
Name		
Title		
	Street	
	City/State/Zip Code	
	Phone	
Relationship		
Period of acquaintance		

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Respond to each of the following inquiries where applicable. Indicate on an attachment sheet which items you are replying to and indicate which questions, if any, are inapplicable. Has your license or right to practice before any state, court agency, or other tribunal 1. ever been denied, revoked or suspended? If so, describe the facts and circumstances fully on an attached sheet. □ Yes \square No 2. Have you ever been censured, reprimanded, adjudged or held in contempt or otherwise disciplined by any judge, court, agency or tribunal? If so, describe the facts and circumstances fully on an attached sheet. \square Yes \square No 3. Has your professional conduct or ability been the subject of comment, favorable or unfavorable, in a written opinion of any judge, court, or other tribunal? If so, attach a copy of the opinion and state any facts and circumstances you feel appropriate. Use attached sheet. \square Yes \square No Have you ever been the subject of any complaint filed with, or made to any attorney 4. disciplinary body or any bar association or committee thereof? If so, state fully the facts and circumstances and the disposition of the matters on an attached sheet. □ Yes \square No 5. Have you been sued by a client? If so, state fully on an attached sheet the facts and circumstances, the court and case number, and the disposition of the matter. □ Yes \square No Please supply any additional information you wish to support your application. 6. Please submit a copy of a recent brief or memorandum of points and authorities you 7. have authored. I certify that the above information is true and correct. Dated:

Signature

Attorneys are selected to serve on the panel at the pleasure of the Court to represent indigent defendants. This application only provides information for the use of the Court to select members of the panel and does not create entitlement for participation on the panel or appointment to cases. Panel attorneys are subject to removal by the Court.

I understand and agree that representation of an indigent client upon appointment by the Court is a professional privilege and duty, subject to the Court's discretion, and even if I am placed on the panel, I have no "right to appointment" to represent any indigent client. I agree to abide by the Regulations for the Implementation of the Northern District's Criminal Justice Act Plan.

	I certify that I have read and understand the above and agree to it.		
Dated:			
	Signature		

Northern District of California Criminal Justice Act Panel Application Form Office of the Federal Public Defender P.O. Box 36106 San Francisco, CA 94102 (415) 436-7700

PROFESSIONAL EXPERIENCE INQUIRY AUTHORIZATION AND WAIVER FORM

I hereby authorize the administrators of the disciplinary and inquiry bodies of any court, bar or other association to disclose to the Criminal Justice Act Administration Committee of the Northern District of California all information contained in the files of such bodies concerning my present professional status, all complaints which have been made against me, together with the disposition thereof. I expressly waive whatever right I may have to confidentiality of the foregoing information.

I also hereby authorize the custodian of any records or information related to my application for the Criminal Justice Act Panel of the Northern District of California to permit the examination or receipt of such records and/or information by anyone designated by the Criminal Justice Act Administration Committee.

Print or Type Name	Signature
	_
Social Security Number	Date Signed

Northern District of California Criminal Justice Act Panel Application Form Office of the Federal Public Defender P.O. Box 36106 San Francisco, CA 94102 (415) 436-7700

STATE BAR OF CALIFORNIA RELEASE OF ALL CLAIMS FORM

I hereby release, discharge and exonerate the State Bar of California, its agents and representatives, and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, or the information or the investigation made by the State Bar of California.

The undersigned further waives all rights or benefits which the undersigned now has or in the future may have under the terms of § 1542 of the Civil Code of the State of California, which said section reads as follows:

"A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executive the release, which if know by him must have materially affected his settlement with the debtor."

Print or Type Name	Signature	
Social Security Number	Date Sigr	